



AMENDMENT TRANSMITTAL LETTER			DOCKET NUMBER: P-CW 5196	
SERIAL NO: 09/694,758	FILING DATE: October 23, 2000	EXAMINER: S. Tizio	GROUP ART UNIT: 1627	
INVENTION: GENE EXPRESSION PROFILING OF INFLAMMATORY BOWEL DISEASE				

TO COMMISSIONER FOR PATENTS

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C., 20231 on May 13, 2002.

By: JAMES J. WONG
James J. Wong, Reg. No. 34,949

May 13, 2002
Date of Signature

TECH CENTER 1600/2900

MAY 22 2002

RECEIVED

Transmitted herewith is a Response to the Restriction Requirement mailed February 12, 2002, in the above-identified application.

- ☒ Small Entity status of this application has been established under 37 CFR 1.27.
- ☒ Petition for Extension of Time is enclosed (in duplicate).
- ☒ Revocation and Power of Attorney with change of address.
- ☒ Information Disclosure Statement; Form 1449 with eleven (11) references.
- ☒ No additional claims fee is required.
- ☐ An additional claims fee is required and has been calculated as shown below:

CLAIMS AS AMENDED

	NUMBER AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE			FEE	
							SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
TOTAL CLAIMS	18	-	18	-	0	x	\$9	\$18	=	\$0.00	\$
INDEPENDENT CLAIMS	6	-	6	-	0	x	\$42	\$84	=	\$0.00	\$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/> YES		<input checked="" type="checkbox"/> NO		\$140	\$280	=	\$0.00	\$
							TOTAL ADDITIONAL FEE			\$0.00	\$

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

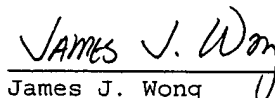
** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.

Inventors: Shukti Chakravarti
Serial No.: 09/694,758
Filed: October 23, 2000
Page 2

- Please charge my Deposit Account No. 03-0370 the amount of \$_____. A duplicate copy of this sheet is enclosed.
- X A check in the amount of \$200.00 which covers the fee for a two-month extension of time.
- X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-0370. A duplicate copy of this sheet is enclosed.
- X Any additional filing fees required under 37 C.F.R. 1.16.
- X Any patent application processing fees under 37 C.F.R. 1.17.
- X The Commissioner is hereby authorized to charge to Deposit Account No. 03-0370 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,



James J. Wong
Registration No. 34,949
CAMPBELL & FLORES LLP
4370 La Jolla Village Drive
7th Floor
San Diego, California 92122
858-535-9001
USPTO CUSTOMER NO. 23601



REVOCATION OF POWER OF ATTORNEY AND
POWER OF ATTORNEY AND CHANGE OF
ADDRESS (2 pages)

Attorney Docket No.: P-CW 5196
Serial No.: 09/694,758

TECH CENTER 160/2900

MAY 22 2002

RECEIVED

I hereby certify that this correspondence is being deposited with
the United States Postal Service as first class mail in an
envelope addressed to: Commissioner for Patents, Washington, D.C.
20231, on May 13, 2002.

By James J. Wong
James J. Wong, (Reg. No. 34,949)

May 13, 2002
Date of Signature